

ARROYO WATER COMPANY

HC 6 BOX 1048 L **PAYSON, ARIZONA 85541** 928-474-1766 FAX: 928-474-7812

ORIGINAL

October 23, 2008

Docket Control

Arizona Corporation Commission 1200 W. Washington Street Phoenix, Arizona 85007

RE: W-04286A-04-0774

Compliance: Monthly Coliform Monitoring

Enclosed are the Monthly Coliform monitoring, dated 10-15-08 from Test America.

Thank you.

Manay Moreno Nancy Moreno

Office Manager

Enclosed: October Coliform monitoring

Arizona Corporation Commission DOCKETED

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Arizona Department of Enivronmental Quality **Drinkling Water Microbiological Analysis Report**

(This form is only for DISTRIBUTION SYSTEM compliance samples)

04-083			Arroyo Water Compar			
PWS ID Number		Name of Public Water System				
10/05/08	09:50	Jay Harrell 928-472-3109				
Sample Date	Time (24- hour clock)	Owner/Contact Person and 10-Digit Phone Number				
	(24- Hour Glock)					
		Ī		\		
3			Only use if Initial S	sample was Posit	:ive-	
Sampling Site ID or Name		Specimen ID Number of Initial Sample			ple	
		Repeat, Original Location				
			Repeat, Other Location			
		Repeat, Downstream Location				
		Repeat, Upstream Location				
400mL Repeat (Single Tap Only)						
			300mL Repeat (Single Tap Only)			
		Wilcrobioic	ogical Analysis		Result	
Analysis		Contaminant	Cont	Analysis Run	"P" = Present	
Method	MCL*	Name		Date/Time	"A" = Absent	
	Present/2 or					
9223	more coliform)	Total Coliform	3100 10	0/07/2008 14:35	ABSENT	
Only Report Fecal/E.Coli Result if Total Coliform Result is Positive						
	Offiny Report Fe	calle.com Result	th Total Comonn Nes	uit is rositive	Result	
Analysis		Contaminant	Cont	Analysis Run	"P" = Present	
Method	MCL*	Name	Code	Date/Time	"A" = Absent	
	Present/2 or					
	more coliform)	Fecal Coliform	3013			
0000	Present/2 or	Escherichia coli	i 3014			
9223 *MCL: If sys	more coliform) tem is < 33 000 th	or E. Coli en MCL is 2 or m	,,,,,,	sitive.		
*MCL: If system is ≤ 33,000, then MCL is 2 or more total coliform-positive. If system is ≥ 33,000, then no more than 5% of the samples may be total coliform-positive.						
Laboratory Information						
(To be filled out by laboratory personnel)						
Specimen Number	er: F	PRJ0264-03A	Lab ID Number:	AZ0728		
Lab Name: TestAmerica Phoenix						
	d Phone Number of		ab Contact: Corey Schrader 602-437-3340			
Authorized Signature: ConySchool						
Date Public Water System Notified: [10/09/2008						
Comments: Please mail completed form to:						
Arizona Department of Environmental Quality						
Water Quality Data Unit 5415B-1						
1110 West Washington Street Phoenix Arizona 85007						

1110 West Washington Street, Phoenix, Arizona 85007

For Questions Call: (602) 771-4641 or within AZ (800) 234-5677 ext. 771-4641

Instructions for the Arizona Drinking Water Microbiological Analysis Reporting Form